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CONFIRMATION NO. 8403

<b>SERIAL NUMBER</b> 10/523,027	<b>FILING OR 371(c) DATE</b> 02/02/2005 <b>RULE</b>	<b>CLASS</b> 523	<b>GROUP ART UNIT</b> 1709	<b>ATTORNEY DOCKET NO.</b> ZU-417	
<b>APPLICANTS</b> Weiping Zeng, Moriyama-shi, JAPAN; <i>WZ</i> Akari Shimozono, Moriyama-shi, JAPAN; <i>AS</i>					
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP03/12503 09/30/2003 <i>NP</i>					
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2002-339196 11/22/2002 <i>NP</i>					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature <i>MP</i> Initials		<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> H. Jay Spiegel and Associates PC P.O. Box 11 Mount Vernon, VA22121					
<b>TITLE</b> Dental adhesive composition					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		